

LU9000062474

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

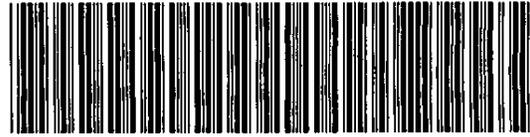
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100254216691

12/03/13--01022--002 \*\*25.00

12 DEC -3 PM 1:57  
2013

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: JAL DISTRIBUTORS CENTRAL FLORIDA, LLC.**  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**JOSE A. LOPEZ**

Name of Person

**JAL DISTRIBUTORS CENTRAL FLORIDA, LLC.**

Firm/Company

**1516 MAX HOOKS RD # E**

Address

**GROVELAND, FL 34736**

City/State and Zip Code

**joanloga56@hotmail.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**JOSE A LOPEZ**

Name of Person

at **786 351-3594**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

\$30.00 Filing Fee &  
Certificate of Status

\$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

\$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

RECEIVED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL  
JAN 19 2007  
10:07:03 PM 1-18-07

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager  
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	PACHECHO, RODOLFO	960 NE 214 LANE APT. 4 NORTH MIAMI, FL 33179	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	ALVAREZ, LUIS A	2369 WEST 80TH ST. #2 HIALEAH GARDENS, FL 33016	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	ALVAREZ, LUIS A	1516 MAX HOOKS RD # E GROVELAND, FL 34736	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

